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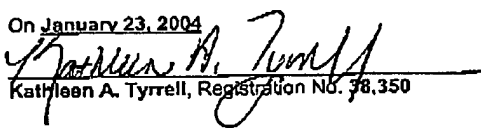
**RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 1642****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****OFFICIAL**

Attorney Docket No.: **DEX-0150**  
Inventors: **Sun et al.**  
Serial No.: **09/762,021**  
Filing Date: **August 6, 2001**  
Examiner: **Ungar, Susan NMN**  
Group Art Unit: **1642**  
Title: **A Novel Method of Diagnosing,  
Monitoring, Staging, Imaging and  
Treating Colon Cancer**

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On January 23, 2004

  
Kathleen A. Tyrrell, Registration No. 78,350

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Dear Sir:

**Reply under 37 C.F.R. 1.116**

This is a reply to the Final Rejection dated October 23,  
2003 setting a three (3) month statutory period for response.  
Please enter the following amendments and remarks into the  
record.

Attorney Docket No.: DEX-0150  
Inventors: Sun et al.  
Serial No.: 09/762,021  
Filing Date: August 6, 2001  
Page 2

Amendments to the claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks begin on page 4.

## FACSIMILE COVER SHEET

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Licata &amp; Tyrrell P.C.

66 E. Main Street  
Marlton, New JerseyTel: (856) 810-1515  
Fax: (856) 810-1454

January 23, 2004

TO: Examiner Ungar (TC1600)

GROUP: 1642

FAX NUMBER: 703-872-9307

ATTORNEY DOCKET NO.: DEX-0150

SERIAL NO.: 09/762,021

FILED: August 6, 2001

NUMBER OF PAGES: 13

MESSAGE: Attached please find Amendment Transmittal Letter; Reply under 37 C.F.R. 1.116 mailed October 23, 2003 with one (1) attachment; and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

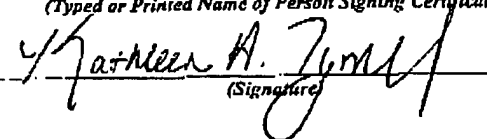
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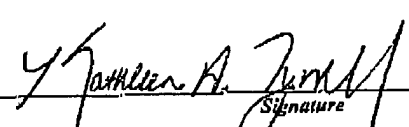
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<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No. <b>DEX-0150</b>
Applicant(s): <b>Sun et al.</b>			
Serial No. <b>09/762,021</b>	Filing Date <b>August 6, 2001</b>	Examiner <b>Ungar, Susan</b>	Group Art Unit <b>1642</b>
Invention: <b>A Novel Method of Diagnosing, Monitoring, Staging, Imaging and Treating Colon Cancer</b>			
<p>I hereby certify that this <u>Reply under 37 C.F.R. 1.116 with one (1) attachment</u>  <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u>)</p> <p>on <u>January 23, 2004</u>  <small>(Date)</small></p> <div style="text-align: right; margin-top: 100px;"> <u>Kathleen A. Tyrrell</u>  <small>(Typed or Printed Name of Person Signing Certificate)</small>    <small>(Signature)</small> </div>			
<p><b>Note: Each paper must have its own certificate of mailing.</b></p>			

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. <b>DEX-0150</b>		
Applicant(s): Sun et al.					
Serial No. <b>09/762,021</b>	Filing Date <b>August 6, 2001</b>	Examiner <b>Ungar, Susan</b>	Group Art Unit <b>1642</b>		
Invention: <b>A Novel Method of Diagnosing, Monitoring, Staging, Imaging and Treating Colon Cancer</b>					
<b>TO THE COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	1 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	6 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: <b>January 23, 2004</b></div></div> <div style="margin-top: 20px;"><div style="display: flex; justify-content: space-between;"><div> _____ Kathleen A. Tyrrell, Registration No. 38,350  LICATA &amp; TYRRELL P.C. 66 East Main Street Marlton, New Jersey 08053 Tel : 856-810-1515 Fax: 856-810-1454</div><div style="border: 1px solid black; padding: 5px; width: 300px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p><p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p></div></div><div style="margin-top: 20px;">CC:</div></div>					